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|-----------------------------------------------------------------------------------------------------|------------------------|-------------------|
| REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS | Application Number | 10/705,791 |
| | Filing Date | November 10, 2003 |
| | First Named Inventor | Kenneth CHIEN |
| | Art Unit | 1614 |
| | Examiner Name | Not Yet Assigned |
| | Attorney Docket Number | 220002066201 |

Commissioner for Patents
To: P.O. Box 1450
 Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

all the attorneys/agents of record.
 the attorneys/agents (with registration numbers) listed on the attached paper(s), or
 the attorneys/agents associated with Customer Number 25225

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

This withdrawal is being made at the request of the applicant.

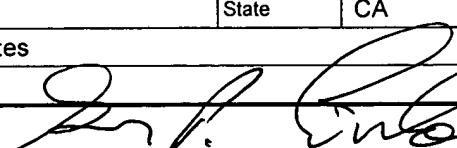
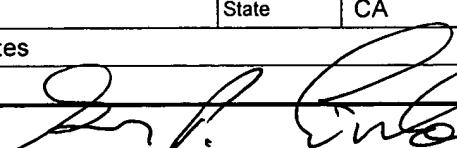
CORRESPONDENCE ADDRESS

1. The correspondence address is NOT affected by this withdrawal.
 2. Change the correspondence address and direct all future correspondence to:

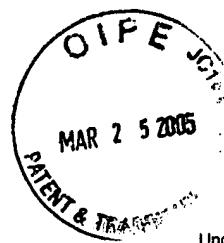
The address associated with Customer Number:

OR

Firm or Individual Name **Stacy Taylor**
Foley & Lardner, LLP

| | | | | | |
|-----------|-------------------------------------------------------------------------------------|------------------|----------------|-----|-------|
| Address | 11250 El Camino Real, Suite 220 | | | | |
| City | San Diego | State | CA | Zip | 92130 |
| Country | United States | | | | |
| Telephone |  | | | | Fax |
| Signature |  | | | | |
| Name | Gregory P. Einhorn | Registration No. | 38,440 | | |
| Date | March 23, 2005 | Telephone No. | (858) 720-5133 | | |

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.



IFW

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | | | |
|------------------------------------------|---|------------------------|-------------------|
| | | Application Number | 10/705,791 |
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| | | First Named Inventor | Kenneth CHIEN |
| | | Art Unit | 1614 |
| | | Examiner Name | Not Yet Assigned |
| Total Number of Pages in This Submission | 4 | Attorney Docket Number | 220002066201 |

ENCLOSURES (Check all that apply)

| | | |
|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance Communication to TC |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment/Reply | <input type="checkbox"/> Petition | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Terminal Disclaimer | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Request for Refund | Request for withdrawal as attorney or agent and change of correspondence address. (1 page, 2 copies) |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> CD, Number of CD(s) _____ | Return postcard receipt. |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> Landscape Table on CD | |
| <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application | Remarks | |
| <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | | |

CUSTOMER NO. 25225

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|--------------|-------------------------|----------|--------|
| Firm Name | MORRISON & FOERSTER LLP | | |
| Signature | | | |
| Printed name | Gregory P. Einhorn | | |
| Date | March 23, 2005 | Reg. No. | 38,440 |

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: March 23, 2005

Signature: (Matthew Russell)